

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 21 AG 8: 33

<u>Please type or print legibly.</u>

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

	STATE OF IDAHO
1. The assumed business name which the u business is:	indersigned use(s) in the transaction of
Loba Roofing	
2. The true name(s) and <u>business</u> address(e	
business under the assumed business na Name	ome: <u>Complete Address</u>
Luke Boyce	1252 Bingham Ave. Idaho Falls, ID. 8.
Gabe Lowe	1252 Bingham Ave. Idaho Falls, ID. 8. 587 Hansen Apt. 26 Idaho Falls, ID. 8
3. The general type of business transacted to	
	on and Public Utilities
<ul><li>Wholesale Trade</li><li>✓ Construction</li><li>✓ Services</li><li>✓ Agriculture</li></ul>	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estat	te Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:	Secretary of State
	700 West Jefferson Basement West
	PO Box 83720
	Boise ID 83720-0080 - 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	nent Phone number (optional):
	Secretary of State use only
1100 1 1/10	-   g
gnature: (signature required)	IDAHO SECRETARY OF STATE
inted Name: Luke Boyce/Gabe Lowe	03/21/2006 05:00 CK: 6135 CT: 198317 BH: 944532
apacity/Title: Partner/owner	算器